

FILED

Oct 05 1998 8:00am
Secretary of State

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #P97000066224

(1)

1. Corporation Name
Mechanical Insulation & Technologies, Inc.
852-29 Saxon Blvd., Ste 108
Orange City FL 32763

Principal Place of Business
% Richard C. Sawyer
852-29 Saxon Blvd, Ste 108
Orange City FL 32763

Mailing Address
% Richard C. Sawyer
852-29 Saxon Blvd, Ste 108
Orange City FL 32763

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 852-29 Saxon Blvd. Suite, Apt. #, etc. 22 Suite 108 City & State 23 Orange City FL Zip 24 32763		2a. Mailing Address 26 852-29 Saxon Blvd. Suite, Apt. #, etc. 27 Suite 108 City & State 28 Orange City FL Zip 29 32763		3. Date Incorporated or Qualified 7/14/97	
		4. FEI Number 59-3456652		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Richard C. Sawyer
~~P O Box 504~~ 1969 Courtyard Blvd
~~Orange FL 32764~~ Deltona, FL 32738

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	President
NAME	Richard C. Sawyer	1.2 NAME	Richard C. Sawyer
STREET ADDRESS	P O Box 504 1969 Courtyard Blvd	1.3 STREET ADDRESS	852-29 Saxon Blvd., Suite 108
CITY - ST - ZIP	Orange FL 32764 Deltona, FL 32738	1.4 CITY - ST - ZIP	Orange City, FL 32763
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)